PTO/SB/17 (12-04v2)
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FEE TRANSMITTAL				Application Number Filing Date		September 23, 2003		
FOI F1 2003				Examiner Name M. C. Flo		M. C. Flood		
X Applicant claims small entity status. See 37 CFR 1.27				Art Unit		1654		
TOTAL AMOUNT OF PAYMENT (\$) 800.00				Attorney Docket No. 61843(51035)				
METHOD OF PAYMEN	IT (check all t	nat apply)						
Check Credit (Card N	Ioney Order	None	Other (olease ident	ify):		
x Deposit Account Dep	osit Account Numb	er: 04-1105 Der	oosit Accou	nt Name:	Ed	wards & Ange	II, LLP	
For the above-iden	tified deposit a	account, the Dire	ector is h	ereby authorize	d to: (chec	k all that apply)		
x Charge fee(s	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							e filing fee
fee(s) under	37 CFR 1.16	and 1.17				-		
1. BASIC FILING, SEARC	H AND FYAR	INATION FEE						
i. Dadio i ilino, dearo	•	G FEES		RCH FEES	EXAMIN	IATION FEES		
		Small Entity		Small Entity		Small Entity		
Application Type	Fee (\$)		Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees P	aid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							<u>Fee (\$)</u>	Fee (\$)
Each claim over 20 (including Reissues)							50	25
Each independent claim over 3 (including Reissues)						200	100	
Multiple dependent claims							360	180
	Total Claims							
1420 =	× _	=			<u>Fe</u>	<u>e (\$) </u>	ee Paid (\$	l
Indep. Claims Extra	Claims F	ee (\$)	Fee Pa	id (\$)				_
1 -3=	x _	<u> </u>						
3. APPLICATION SIZE FE								
If the specification and di								
listings under 37 CFR sheets or fraction there	of. See 35 U	.S.C. 41(a)(1)(0	Tee due 3) and 3	18 \$230 (\$123 10 7 CFR 1.16(s).	or smail er	inty) for each ac	iditionai 50	
	xtra Sheets			litional 50 or frac	tion thereo	f <u>Fee (\$)</u>	Fee F	aid (\$)
100 =	<u>. </u>	/50	(r	ound up to a who	le number)	x :	=	
4. OTHER FEE(S)							Fees	Paid (\$)
Non-English Specificat	ion, \$130 fe	(no small entit	y discou	int)				
Other (e.g., late filing surcharge): 1806 Submission of An Information Disclosure Statement						Statement	180.00	
2252 Extension for response within second month							225.00	
2801 Request for continued examination (RCE) (see 37						395.00		

SUBMITTED BY	\bigcirc				
Signature	Develor-	Registration No. (Attorney/Agent)	57,665	Telephone	(617) 439-4444
Name (Print/Type)	Dwight DKim			Date	October 28, 2005

I hereby certify that this corresponder	nce is being deposited with the t	J.S. Postal Service as	Express Mail, Airbill No.	EV 317952692 US
in an envelope addressed to: Commi	issioner for Patents, P.OnBox 1	450, Alexandria, VA 2	2313-1450, on the date	shown below.
5	637	P	21	

Dated: October 28, 2005

Signature: _

_ (Bonnie S. Crespi)